## Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

KOLS-100PA

CLAIMS AS FILED - PART I							;	SMALL ENTITY			OTHER THAN		
ļ.—			(Column 1)		(Column 2)			TYPE		OR	OR SMALL ENTIT		
TOTAL CLAIMS			30				}	RATE	FEE	7	RATE	FEE	
FOR			NUMBER FILED		NUME	BER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			30 minus 20=		10			X\$ 9=		OR	X\$18=	1800	
INDEPENDENT CLAIMS			2 _ minus 3 =		g			X43=		OR	X86=		
M	JLTIPLE DEPE	NDENT CLAIM P	RESENT		· .			+145=		OR	+290=		
* 1	the difference	e in column 1 is	less than z	ero, enter	"0" in c	column 2	ı.	TOTAL	<b></b> -	OR	TOTAL	9000	
		CLAIMS AS A	MENDED - PART II							J	OTHER		
_		(Column 1)	<del>,</del>	(Colun		(Column 3)		SMALL	ENTITY	OR	SMALL		
<b>AMENDMENT A</b>		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=	·	OR	X\$18=		
	Independent	*	Minus	***	CL AIAA	=		X43=		OR	X86=		
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=		
•								TOTAL DDIT. FEE		OR	TOTAL ADDIT, FEE		
		^		-	,	ADDIT. PEET							
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total ·	*	Minus	strate		=	Γ	X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		= .		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							4.45		Ī			
						-	L	+145=		OR	+290=		
						A	TOTAL DDIT, FEE	<u> </u>	OR ,	TOTAL ODIT. FEE			
-1		(Column 1) CLAIMS	<u> </u>	(Colum		(Column 3)			· ·		•		
AMENDMENT C		REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID F	ER JSLY	PRESENT EXTRA			ADDI- TONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X43=			X86=		
	FIRST PRESE		<b> </b>			OR	7.00-						
* 15	the entry in solve		+145=		OR	+290=							
If	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."								(	OR A	TOTAL DDIT. FEE		
· "	he *Highest Num	ber Previously Paid	For (Total or	Independen	t) is the f	o, enter "3." highest number		DIT. FEE	opriate box				